PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

AT 325

CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN		
-	OTAL OLABAG	-	(Column 1)		(Colu	(Column 2)		TYPE		OR	SMALL	ENTITY
TOTAL CLAIMS			9					RATE	FEE]	RATE	FEE ·
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			9 minus 20= 1		* 0			X\$ 9=		OR	XS18=	0
INDEPENDENT CLAIMS			/ minus 3 = **		*	0		X43=		OR	X86=	. <i>O</i> .
ML	JLTIPLE DEPEI	NDENT CLAIM P	RESENT			<u> </u>		+145=		OR	+290=	D
* If	the difference	e in column 1 is	less than zero, enter "0" in column 2			ļ	TOTAL		OR	TOTAL	770	
	C			,	_	OTHER	THAN					
		(Column 1)				(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A	·	CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		XS 9=		OR	X\$18=	
	Independent	*	Minus	***		= .		X43=		OR	X86=	
	FIRST PRESE	ENTATION OF MU	JETIPLE DEF	PENDENT	CLAIM			+145=		OR	+290=	
							L	TOTAL			TOTAL	
		(Calumn 1)	Α	ADDIT. FEE	<u></u>]	ADDIT. FEE					
		(Column 1) CLAIMS		(Colum HIĞHE		(Column 3)	lr	· ····	ADDI-	1	-	4001
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=	
AME	Inaependent	*	Minus	***	_	=		X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	ENDENT	CLAIM	اليا		+145=		OR	+290=	
							L	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
						100m. r LL						
AMENDMENT C	`	(Column 1) CLAIMS REMAINING AFTER AMENDMENT	·	(Colum HIGHE NUMBI PREVIOU PAID F	ST ER JSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	Γ	X\$ 9=		OR	X\$18=	
ME [Independent	*	Minus	***		= .	1	X43=		Ī	X86=	
۷	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							740-		OR	700-	
								+145=		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."												
		her Previously Paid					four	d in the ann	ronriate hov	in colu	ima 1	